POSITION	INITIALS	ID NO.	DATE
	Mell		08/03/0
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	8-16-01
FORMALITY REVIEW	J.A.	J.Coll	08/17/01
RESPONSE FORMALITY REVIEW	M.H	025	09-18-01

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim		Date
Final	Original	
	1	✔ ✔
	2	✔ ✔
	3	÷ ✔ ✔
	4	÷ N
	5	÷ ✔ ✔
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	8	✔ ✔
	9	N
	10	N
	11	N
	12	N
	13	N
	14	÷ ✔ ✔
	15	÷ N
	16	✔
	17	✔
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Claim		Date
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If more than 150 claims or 10 actions
staple additional sheet here

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